

County: Waukesha
 LINDEN GROVE - NEW BERLIN
 13755 WEST FIELDPOINTE DRIVE

Facility ID: 5210

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NEW BERLIN 53151 Phone: (262) 796-3660
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? Yes
 Number of Beds Set Up and Staffed (12/31/01): 135
 Total Licensed Bed Capacity (12/31/01): 135
 Number of Residents on 12/31/01: 124

Ownership:
 Highest Level License: Non-Profit Corporation
 Operate in Conjunction with CBRF? Skilled
 Title 18 (Medicare) Certified? No
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 126

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)			
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year			
Home Health Care	No					1 - 4 Years	44.4		
Supp. Home Care-Personal Care	No					More Than 4 Years	41.9		
Supp. Home Care-Household Services	No	Developmental Disabilities	3.2	Under 65	1.6		13.7		
Day Services	No	Mental Illness (Org./Psy)	20.2	65 - 74	7.3				
Respite Care	Yes	Mental Illness (Other)	0.8	75 - 84	30.6		100.0		
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	53.2	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.6	95 & Over	7.3	Full-Time Equivalent			
Congregate Meals	No	Cancer	2.4			Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	4.8		100.0	(12/31/01)			
Other Meals	No	Cardiovascular	19.4	65 & Over	98.4				
Transportation	No	Cerebrovascular	16.1			RNs	10.2		
Referral Service	No	Diabetes	3.2	Sex	%	LPNs	9.2		
Other Services	No	Respiratory	4.0			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	24.2	Male	18.5	Aides, & Orderlies			
Mentally Ill	No			Female	81.5				
Provide Day Programming for			100.0						
Developmentally Disabled	Yes				100.0				

Method of Reimbursement

		Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care			Managed Care				
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	Total Resi - dents	% Of All
Int. Skilled Care	0	0.0	0	2	3.0	131	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	1.6
Skilled Care	17	100.0	385	52	77.6	111	0	0.0	0	38	100.0	186	0	0.0	0	2	100.0	419	109	87.9
Intermediate	---	---	---	12	17.9	92	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	12	9.7
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	1	1.5	166	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.8
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	17	100.0		67	100.0		0	0.0		38	100.0		0	0.0		2	100.0		124	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	2.5	Daily Living (ADL)	Independent			
Private Home/With Home Health	0.4	Bathing	0.0	54.0	46.0	124
Other Nursing Homes	3.3	Dressing	4.0	58.1	37.9	124
Acute Care Hospitals	88.8	Transferring	24.2	58.9	16.9	124
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	15.3	67.7	16.9	124
Rehabilitation Hospitals	0.4	Eating	51.6	28.2	20.2	124
Other Locations	4.7	*****				
Total Number of Admissions	276	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	8.1	Receiving Respiratory Care		4.0
Private Home/No Home Health	26.9	Occ/Freq. Incontinent of Bladder	57.3	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	11.5	Occ/Freq. Incontinent of Bowel	51.6	Receiving Suctioning		0.0
Other Nursing Homes	2.5			Receiving Ostomy Care		0.0
Acute Care Hospitals	9.0	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp. -MR/DD Facilities	0.7	Physically Restrained	5.6	Receiving Mechanically Altered Diets		64.5
Rehabilitation Hospitals	0.4					
Other Locations	16.5	Skin Care		Other Resident Characteristics		
Deaths	32.6	With Pressure Sores	7.3	Have Advance Directives		86.3
Total Number of Discharges		With Rashes	0.8	Medications		
(Including Deaths)	279			Receiving Psychoactive Drugs		59.7

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

	This Facility	Other Hospital-Based Facilities		All Facilities	
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	93.3	88.1	1.06	84.6	1.10
Current Residents from In-County	74.2	83.9	0.88	77.0	0.96
Admissions from In-County, Still Residing	16.3	14.8	1.10	20.8	0.78
Admissions/Average Daily Census	219.0	202.6	1.08	128.9	1.70
Discharges/Average Daily Census	221.4	203.2	1.09	130.0	1.70
Discharges To Private Residence/Average Daily Census	84.9	106.2	0.80	52.8	1.61
Residents Receiving Skilled Care	89.5	92.9	0.96	85.3	1.05
Residents Aged 65 and Older	98.4	91.2	1.08	87.5	1.12
Title 19 (Medicaid) Funded Residents	54.0	66.3	0.81	68.7	0.79
Private Pay Funded Residents	30.6	22.9	1.34	22.0	1.39
Developmentally Disabled Residents	3.2	1.6	2.06	7.6	0.43
Mentally Ill Residents	21.0	31.3	0.67	33.8	0.62
General Medical Service Residents	24.2	20.4	1.19	19.4	1.25
Impaired ADL (Mean)*	54.5	49.9	1.09	49.3	1.11
Psychological Problems	59.7	53.6	1.11	51.9	1.15
Nursing Care Required (Mean)*	9.6	7.9	1.21	7.3	1.31